## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF<sub>5</sub>

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears i Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability C Florida document number <u>L21000050818</u>	Company were filed on $\frac{02/6}{2}$ .	09/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the de	signation "LLC" or the abbi	eviation P.L.C."
Enter new principal offices address, if applicable:	1550 Madruga A	venue, Suite 303	22 JI
(Principal office address MUST BE A STREET ADDI	(Coral Gables, FL	. 33146	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
			ω
Enter new mailing address, if applicable:	1550 Madruga A	venue, Suite 303	PH L
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, FL	. 33146	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our re	cords, <u>enter the name</u>	of the new register
Name of New Registered Agent.			
New Registered Office Address: 1550	1550 Madruga Avenue, Suite 303  Enter Florida street address		
Coral	Gables	, Florida	46
	City	, FIOLIGE	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Lam Welen

Corporama, Inc.

By: Lauren Underwood, Attorey-in-Fact

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Actio
MGR	JUAN CARLOS GUEDEZ MARTINEZ	2330 PONCE DE LEON BLVD	
		CORAL GABLES, FL 33134	≅Remove
			Change
MGR	1GR JUAN CARLOS GUEDEZ MARTINEZ	1550 Madruga Avenue, Suite 303	■ Add
	Coral Gables, FL 33146	□Remove	
			[] Change
			□Add
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		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		Remove	

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 13 Lawlel Signature of a member or authorized representative of a member JUAN CARLOS GUEDEZ MARTINEZ, MGR, By: Lauren Underwood, Atttorney-in-Fact

Typed or printed name of signee